## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

				(571)-273-2885			
INSTRUCTIONS: This appropriate. All further e indicated unless correcte maintenance fee notificat	form should be used for correspondence includir d below or directed of ions.	or transmitting the ISSU og the Patent, advance on nerwise in Block I, by (a	JE FEE and PUBLIC rders and notification a) specifying a new co	ATION FEE (if requ of maintenance fees v arrespondence address	ired). E vill be : ; and/or	locks I through 5 s mailed to the current (b) indicating a sep-	hould be completed who correspondence address arate "FEE ADDRESS" i
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23577	7590 02/09	/2009					
RIDOUT & MA 225 KING STRE 10TH FLOOR		Thereby certify that this Pecch Tanamital is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an enveloped addressed to the Mail Stop ISSUE FEE address above, or being facsimil transmitted to the USPTO (571) 273-2885, or the date indicated below.					
TORONTO, ON		(Depositor's name					
CANADA							(Signature
							(Date
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENT		TOR ATTORNEY DOCKET N		CONFIRMATION NO.
10/721,725			Boris Dorfman		42783-0118		5769
TITLE OF INVENTION:		OD OF AUDIO TESTIN		VICES		12703 0110	3107
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D		EFEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	05/11/2009
EXAMI	INER	ART UNIT	CLASS-SUBCLASS				
PAUL, DISLER		2614	381-058000				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  Change of correspondence address for Change of Correspondence Address form F7IOSB/122) anached.  Address form F7IOSB/122) anached.  "Fee Address" indication of "Fee Address" Indication form F7IOSB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patient front page, list (1) the names of up to 3 registered patient attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to listed, no name will be printed.				
(A) NAME OF ASSIC	ess an assignee is ident in 37 CFR 3.11. Comp INEE Motion Limit	ified below, no assignee detion of this form is NO	data will appear on the T a substitute for filing (B) RESIDENCE: (C) Waterloo, C	e patent. If an assign an assignment. ITY and STATE OR on antario, Can	count ada	RY)	locument has been filed f
	o small entity discount p	permitted)	The Director is he	ed. card. Form PTO-203 reby authorized to cha	3 is atta	ched.	shown above)  efficiency, or credit any an extra copy of this form)
	SMALL ENTITY statu	is. See 37 CFR-1-27.	☐ b. Applicant is no	longer claiming SMA	LL EN	ΓΙΤΥ status, See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the r	ecords of the United Sta	(98 Patent and Trademark	Office.	an the applicant, a reg	istereu -	utorney or agent, or t	ne assignee or other party
Authorized Signature	- OCI	<u> </u>	<u></u>	Date _May	8,	2009	
** *	Colin Climie	Registration No. 56,036					
This collection of informa an application. Confident submitting the completed this form and/or suggestion the confidence of the confidence	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bu	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be served to the	on is required to obtain 1.14. This collection is depending upon the in echief information O	or retain a benefit by s estimated to take 12 ndividual case. Any c fficer, U.S. Patent and	the publi	ic which is to file (an to complete, includi s on the amount of ti ark Office, U.S. Dep	d by the USPTO to proces ng gathering, preparing, a me you require to comple arment of Commerce, P.

ss) nd ete Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.